

# The Hospitality City

CERTIFICATE OF OCCUPANCY

## CITY OF WAVELAND

This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying that at the time of issuance, this structure was in compliance with the various ordinances of the City of Waveland regulating building construction or use.

Certificate #:1718755

Issued to: PRICE MOUNGER & JIM GRIESHABER

Building Address: 138 S BEACH BLVD

City, State, Zip: WAVELAND, MS 39576

Expires: End of occupancy

Issued Date: 07-19-2017

Occupancy Type: R1 Residential Hotel, Motel, Boarding House

Sprinkler System Required:N

Special Conditions: NOME

Building Official

7 240

)ate

#### National Flood Insurance Program V-ZONE CERTIFICATE

Name_Price Mounger		Policy N	fumber (Insurance	Co. Use)	
Building Address or Other De	escription <u>138 S. Beac</u>				
City Waveland		State	MS	Zip Code 39	576
	ECTION I: Flood Insuran	(77 till	2000		
Community Number 285262				10.16.09 :FIRM Zon	e_VE_22
NOT	SECTION II: E E: This Certificate does not	Elevation Informa Substitute for an	ition <i>Elevation Certificate</i>		
<ol> <li>Elevation of the Bottom of</li> <li>Base Flood Elevation (BFE</li> <li>Elevation of Lowest Adjace</li> <li>Approximate Depth of Anti</li> <li>Embedment Depth of Piling</li> </ol>	) ent Grade cipated Scour/Erosion u	sed for Founda	tion Design	22.0 feet (N 9.6 feet (N 2.0 feet (N	IGVD) IGVD) IGVD)
NOTE	SECTION III: V-Zor E: This section must be certif			ir	
I certify that I have developed or rev methods of construction to be used a • The bottom of the lowest horizo the BFE; and	re in accordance with accept ntal structural member of the	ted standards of pre e lowest floor (exc	actice for meeting the luding piles and colu	following provision nns) is elevated to or	s: r above
<ul> <li>The pile and column foundation to the effects of the wind and w associated with the base flood. potential for scour and erosion wave action.</li> </ul>	ater loads acting simultaneo Wind loading values used a	usly on all buildin re those required	g components. Water by the applicable Sta	loading values used	are those
NOTE when breakawa	SECTION IV: Breakawa; This section must be certifi by walls exceed a design safe	ed by a registered	engineer or architect	uare foot	
I certify that I have developed or revi methods of construction to be used for following provisions:	iewed the structural design, por the breakaway walls are in	plans, and specific a accordance with	ations for construction accepted standards of	n and that the design practice for meeting	and the
Breakaway wall collapse shall re The elevated portion of the bui other structural damage doe to (wind and water loading value)	lding and supporting found the effects of wind and wa	dation system sha iter loads acting s	all not be subject to	ollapse, displaceme	ent, or nts
S	SECTION Vignature below certifies:	V: Certification  Section III;			
Certifier's Name <u>Jason Chinich</u> Citle <u>Project Manager</u> Street Address		License Numl	ne James J. Ch per MS 19732		
City Bay St. Louis	HWY 90 Suite 2, State	MS		Zip Code 39520	
signature Xaron Chin	DE	5.26.17	Telepho	ne Number 228-4	

### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

#### **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SEC	F	OR INSUF	RANCE COMPANY USE		
A1. Building Owner's Name MOUNGER	P	olicy Num	ber:		
A2. Building Street Address (in		#2016-319 and/or Bldg No ) or P.O.	Route and	2.	
Box No. 138 S. BEACH BOULEVARD	sidding riper, orine, odito, e	anaror Blag. 140.) or 1.0.	C	ompany N	AIC Number:
City		State	L ZI	P Code	
WAVELAND		Mississippi	39	9576	
A3. Property Description (Lot a TAX PARCEL #:161M-0-11-06)		Parcel Number, Legal De	scription, etc.)		
A4. Building Use (e.g., Reside	ntial, Non-Residential, Add	dition, Accessory, etc.)			
A5. Latitude/Longitude: Lat. 3	0-16-49.1 Lo	ng. <u>-89-22-17.4</u>	Horizontal Datum:	NAD 1	927 NAD 1983
A6. Attach at least 2 photograp	ohs of the building if the Co	ertificate is being used to	o obtain flood insurance	ce.	
A7. Building Diagram Number	- 5				
A8. For a building with a crawls	space or enclosure(s):				
<ul> <li>a) Square footage of craw</li> </ul>	Ispace or enclosure(s)	0 sq ft			
b) Number of permanent fl	ood openings in the crawl	Ispace or enclosure(s) w	ithin 1.0 foot above ac	djacent gra	ade 0
c) Total net area of flood o	penings in A8.b0	sq in			
d) Engineered flood opening	ngs? ☐ Yes ⊠ No				
A9. For a building with an attac	hed garage:				
a) Square footage of attact		sa ft			
b) Number of permanent fl		NEW MEN	ot above adjacent gra	de	0
c) Total net area of flood o			ot abovo aajaooni gia		0
d) Engineered flood opening		3q III			
d) Engineered nood openii	igs: Tes XINO				
SE	ECTION B - FLOOD INS	URANCE RATE MAP	(FIRM) INFORMATION	ON	
B1. NFIP Community Name & C	Community Number	B2. County Name			B3. State
WAVELAND 285262		HANCOCK			Mississippi
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	37. FIRM Panel Effective/	B8. Flood Zone(s)		e Flood Elevation(s) ne AO, use Base
28045C 0363 D		Revised Date	VE		od Depth)
200400 0000	10/10/2009	10/10/2009	VL		22
B10. Indicate the source of the	Base Flood Elevation (BF	E) data or base flood de	pth entered in Item B	9:	
	Community Determine				
B11. Indicate elevation datum u	used for BFE in Item B9: [	☐ NGVD 1929 🗵 NA	VD 1988  Other	/Source:	
B12. Is the building located in a	Coastal Barrier Resource	es System (CRRS) area	or Otherwise Protects	od Area (C	PA)2 T Vac V Na
Designation Date:		RS  OPA	OI OTHORWISE I TOTECTE	A Alea (C	7, 1,4; [] 169 [V] 140
Doorgilation Date.	Г. СВ	NO DAY			
			1		

IMPORTANT: In these spaces, copy the corresponding	ction A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or 138 S. BEACH BOULEVARD	Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:
City State WAVELAND Miss	e ZIP sissippi 395	Code 76	Company NAIC Number
SECTION C – BUILDING ELE	VATION INFORMAT	TION (SURVEY R	EQUIRED)
*A new Elevation Certificate will be required when co C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), N Complete Items C2.a–h below according to the build Benchmark Utilized: BH0959	/E, V1–V30, V (with Bl ing diagram specified i Vertical Datum:	ng is complete. FE), AR, AR/A, AR/ in Item A7. In Puert NAVD 1988	/AE, AR/A1–A30, AR/AH, AR/AO.
Indicate elevation datum used for the elevations in ite NGVD 1929 X NAVD 1988 Other/S	, ,	W.	
Datum used for building elevations must be the same	***************************************	FE.	
a) Top of bottom floor (including basement, crawlspa	ace or enclosure floor)	25.0	Check the measurement used.
b) Top of the next higher floor	add, or dilolosure moor,	N/A.	
c) Bottom of the lowest horizontal structural member	(V Zones only)	23.0	
d) Attached garage (top of slab)	, , , , , , , , , , , , , , , , , , , ,	N/A	The state of the s
<ul> <li>e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comr</li> </ul>	icing the building nents)	N/A.	
f) Lowest adjacent (finished) grade next to building	(LAG)	9.6	X feet meters
g) Highest adjacent (finished) grade next to building	(HAG)	11, 1	X feet meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of decl structural support</li> </ul>	or stairs, including	N/A.	x feet meters
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surv I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	my best efforts to inter	pret the data availa	r law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a lice	ensed land surveyor?	⊠Yes □ No	Check here if attachments.
Certifier's Name JASON P. CHINICHE	License Number		all sections and the section of the
Title PROJECT MANAGER			SON P. CHILL
Company Name JAMES J. CHINICHE, PA, INC.			Seal Seal
Address 412 HWY. 90, SUITE 2			OT Here 19732
City BAY ST. LOUIS	State Mississippi	ZIP Code 39520	OF MISSISSIP.
Signature Chiche	Date 10/17/2016	Telephone (228) 467-6755	-
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per NOTE: The description in A3. above is for information only map in section B4. Recommend verification of (BFE) by lo Owner is responsible for coordinating this certificate with CIS TOP RIM BOLT BETWEEN "ALBERT & VILLE? OF FIF	& not to certify the bucal building official. The Contractor and/or Building	e flood zone is dete ing Official as need	ermined by graphic plotting only. ded. Waveland freeboard = 1 ft. TBM
		/	

#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

#### **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Control of the contro	SEC	TION A - PROPERTY	INFORMATION	10.0001.000	FOR INSUE	RANCE COMPANY USE
A1. Building Own MOUNGER	er's Name		#2017-315		Policy Num	ber:
A2. Building Stree Box No. 138 S. BEACH BO		cluding Apt., Unit, Suite	e, and/or Bldg. No.) o	P.O. Route and	Company N	AIC Number:
City WAVELAND			State Mississip	pi	ZIP Code 39576	Electronic for the first
A3. Property Des TAX PARCEL #:1		nd Block Numbers, Ta 7.001	x Parcel Number, Leg	gal Description, etc.)		
A4. Building Use	(e.g., Residen	tial, Non-Residential,	Addition, Accessory, e	etc.)	. 4. n est	
A5. Latitude/Long	itude: Lat. 30	)-16-49.1	Long89-22-17.4	Horizontal Datu	ım: NAD '	1927 NAD 1983
A6. Attach at leas	st 2 photograp	hs of the building if the	Certificate is being u	 sed to obtain flood insu	rance.	
A7. Building Diag	ram Number	5				
A8. For a building	with a crawls	pace or enclosure(s):				
a) Square for	otage of crawl	space or enclosure(s)	0 s	q ft		
b) Number of	permanent flo	ood openings in the cra	awlspace or enclosure	e(s) within 1.0 foot above	e adjacent gr	ade 0
c) Total net a	rea of flood or	penings in A8.b	) sq in			The Late To be
d) Engineere	d flood openin	gs? Yes 🗆 N	0			
AQ For a building	with an attack	ned garage:				
		ned garage 0			med del Leso	
				1.0 foot above adjacent	grade	0
c) Total net a	rea of flood op	penings in A9.b	0 sq in			
d) Engineere	d flood openin	gs? Yes 🗵 N	lo			
177	SE	CTION B - FLOOD II	NSURANCE RATE	MAP (FIRM) INFORM	ATION	
B1. NFIP Commu WAVELAND 2852		ommunity Number	B2. County HANCOCK	Name		B3. State Mississippi
		<del></del>			-> I BO D-	
B4. Map/Panel Number 28045C 0363	B5. Suffix	B6. FIRM Index Date 10/16/2009	B7. FIRM Panel Effective/ Revised Date 10/16/2009	B8. Flood Zone(	(Zo	se Flood Elevation(s) ne AO, use Base od Depth) 22
Number 28045C 0363  B10. Indicate the  FIS Profi	D source of the	Date 10/16/2009  Base Flood Elevation Community Determ	Effective/ Revised Date 10/16/2009  (BFE) data or base flo	VE ood depth entered in Ite	(Zo Flo em B9:	ne AO, use Base od Depth)
Number 28045C 0363  B10. Indicate the  FIS Profi	D source of the	Date 10/16/2009  Base Flood Elevation	Effective/ Revised Date 10/16/2009  (BFE) data or base flo	VE ood depth entered in Ite	(Zo Flo	ne AO, use Base od Depth)
Number 28045C 0363  B10. Indicate the  FIS Profi	source of the le X FIRM	Date 10/16/2009  Base Flood Elevation Community Determined for BFE in Item B9	Effective/ Revised Date 10/16/2009  (BFE) data or base flor nined	VE  ood depth entered in Iterce:  NAVD 1988	(Zo Flo em B9: Other/Source:	ne AO, use Base od Depth)
Number 28045C 0363  B10. Indicate the  FIS Profi	source of the le X FIRM vation datum ung located in a	Date  10/16/2009  Base Flood Elevation Community Determined for BFE in Item B8  Coastal Barrier Resonance	Effective/ Revised Date 10/16/2009  (BFE) data or base flor nined	VE  ood depth entered in Iterce:  NAVD 1988	(Zo Flo em B9: Other/Source:	ne AO, use Base od Depth) 22

IMPORTANT: In these spaces, copy the corresponding information fro	m Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.0 138 S. BEACH BOULEVARD	D. Route and Box No.	Policy Number:
City State WAVELAND Mississippi	ZIP Code 39576	Company NAIC Number
SECTION C - BUILDING ELEVATION INFO	RMATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction Drawings*  *A new Elevation Certificate will be required when construction of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (Complete Items C2.a–h below according to the building diagram speed Benchmark Utilized: BH0959 Vertical Description of Indicate elevation datum used for the elevations in items a) through head of the NGVD 1929 NAVD 1988 Other/Source:  Datum used for building elevations must be the same as that used for a) Top of bottom floor (including basement, crawlspace, or enclosured b) Top of the next higher floor  c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab)  e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)  f) Lowest adjacent (finished) grade next to building (LAG)	Building Under Construction  Building is complete.  Building Under Construction  Building Is complete.  Building Is c	Check the measurement used.    X feet   meters     X feet   meters
<ul><li>g) Highest adjacent (finished) grade next to building (HAG)</li><li>h) Lowest adjacent grade at lowest elevation of deck or stairs, include</li></ul>		X feet meters
structural support		K leer
SECTION D – SURVEYOR, ENGINEER, OF This certification is to be signed and sealed by a land surveyor, engineer, I certify that the information on this Certificate represents my best efforts to statement may be punishable by fine or imprisonment under 18 U.S. Code Were latitude and longitude in Section A provided by a licensed land surve Certifier's Name  JASON P. CHINICHE	or architect authorized b o interpret the data availa e, Section 1001. eyor? ⊠Yes ☐ No	y law to certify elevation information.  able. I understand that any false  Check here if attachments.
Title PROJECT MANAGER		S GED PROFESS C
Company Name JAMES J. CHINICHE, PA, INC.  Address 4.12 HWY. 90, SUITE 2  City State BAY ST. LOUIS Mississippi	ZIP Code 39520	Seal Here 19732  OF MISSISS
Signature Date	Telephone	-20509300-
Turn Chine 11/01/2017	(228) 467-6755	
Copy all pages of this Elevation Certificate and all attachments for (1) commu		agent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if applica NOTE: The description in A3. above is for information only & not to certify map in section B4. Recommend verification of (BFE) by local building offic Owner is responsible for coordinating this certificate with Contractor and/o IS TOP RIM BOLT BETWEEN "ALBERT & VILLE? OF FIRE HYDRANT NC.2c) is top of concrete column.	the building location. The cial. The flood zone is def or Building Official as nee	termined by graphic plotting only. ded. Waveland freeboard = 1 ft. TBM

IMPORTANT: In these spaces, copy the corresponding	information from	Section A.	FOR INSURANCE COMPANY I	USE
Building Street Address (including Apt., Unit, Suite, and/or 138 S. BEACH BOULEVARD	r Bldg. No.) or P.O.	Route and Box No.	Policy Number:	
City Sta WAVELAND Mis		ZIP Code 39576	Company NAIC Number	
SECTION E – BUILDING ELEV FOR ZONE A	ATION INFORMA O AND ZONE A (		T REQUIRED)	OF STREET, STR
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use natuenter meters.				
E1. Provide elevation information for the following and ch the highest adjacent grade (HAG) and the lowest adja a) Top of bottom floor (including basement,		boxes to show wheth	er the elevation is above or below	
crawlspace, or enclosure) is		X feet _ met	ers above or below the H	AG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		X feet met	ers above or below the LA	AG.
E2. For Building Diagrams 6-9 with permanent flood open	nings provided in S	ection A Items 8 and/o	or 9 (see pages 1–2 of Instructions)	,
the next higher floor (elevation C2.b in the diagrams) of the building is	entransación de Managaria	⊠ feet ☐ met	ers above or below the HA	AG.
E3. Attached garage (top of slab) is		X feet  met	ers above or below the H	AG.
E4. Top of platform of machinery and/or equipment servicing the building is		X feet  met	ers above or below the H	AG.
E5. Zone AO only: If no flood depth number is available, i floodplain management ordinance?   Yes   N			accordance with the community's t certify this information in Section	G.
SECTION F - PROPERTY OWNER	B (OB OWNED)	DEDDECENTATIVE)	PERTIFICATION	
The property owner or owner's authorized representative v	who completes Sec	tions A, B, and E for 2	Zone A (without a FEMA-issued or	
community-issued BFE) or Zone AO must sign here. The	statements in Section	ons A, B, and E are co	orrect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's N	lame			
Address	City		State ZIP Code	
Signature	Date	Ī	elephone	
Comments				

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 138 S. BEACH BOULEVARD	o. Policy Number:
City State ZIP Code WAVELAND Mississippi 39576	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPTION	AL)
The local official who is authorized by law or ordinance to administer the community's floodplain Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and used in Items G8–G10. In Puerto Rico only, enter meters.	
G1. The information in Section C was taken from other documentation that has been sign engineer, or architect who is authorized by law to certify elevation information. (Indicadata in the Comments area below.)	ed and sealed by a licensed surveyor, ate the source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without a or Zone AO.	FEMA-issued or community-issued BFE)
G3. The following information (Items G4–G10) is provided for community floodplain mana	gement purposes.
G4. Permit Number G5. Date Permit Issued G	G6. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for: New Construction   Substantial Improvement	nt
G8. Elevation of as-built lowest floor (including basement) of the building:	feet  meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	feet meters Datum
G10. Community's design flood elevation:	feet meters Datum
Local Official's Name Title	s. Western
Community Name Telephone	
Signature Date	
Comments (including type of equipment and location, per C2(e), if applicable)	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy to	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., 138 S. BEACH BOULEVARD	Unit, Suite, and/or Bldg. No.) or	r P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption FRONT VIEW 08/13/2017



Photo Two

Photo Two Caption REAR VIEW 08/13/2017

#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

#### **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY I						RANCE COMPANY USE	
A1. Building Owner's Name Policy Number:							
Mounger	2018-084						
<ul><li>A2. Building Street Address</li><li>Box No.</li><li>138 S Beach Boulevard</li></ul>	1950 COV, \$6,0506						
City			State		ZIP Code		
Waveland			Mississippi		39576		
A3. Property Description (Lo Parcel #161M-0-11-067.001	and Block Numbers, Tax	Parce	Number, Legal Des	scription, etc.)		=	
A4. Building Use (e.g., Resid	ential, Non-Residential, A	ddition	, Accessory, etc.)	Residential		_	
A5. Latitude/Longitude: Lat	30-16-49	_ong. <u>8</u>	9-22-17	Horizontal Datum	: NAD 1	927 X NAD 1983	
A6. Attach at least 2 photogr	aphs of the building if the	Certific	ate is being used to	obtain flood insura	ince.		
A7. Building Diagram Numbe	r6						
A8. For a building with a crav	vlspace or enclosure(s):						
<ul> <li>a) Square footage of cra</li> </ul>	wlspace or enclosure(s)	5	0 sq ft				
b) Number of permanen	flood openings in the cra	wlspac	e or enclosure(s) wi	ithin 1.0 foot above	adjacent gra	ade0	
c) Total net area of flood	openings in A8.b0	8	sq in				
d) Engineered flood ope	nings? 🗌 Yes 🗵 No	)					
A9. For a building with an att	ached garage:					-	
a) Square footage of att	ached garage0		sq ft				
b) Number of permanen	t flood openings in the att	ached (	garage within 1.0 foo	ot above adjacent g	ırade	0	
	openings in A9.b				-		
	nings? Yes X N		-				
	,						
	SECTION B - FLOOD IN	ISUR/	NCE RATE MAP	(FIRM) INFORMA	TION		
B1. NFIP Community Name	& Community Number		B2. County Name			B3. State	
City of Waveland 285262			Hancock			Mississippi	
B4. Map/Panel B5. Suff Number	B6. FIRM Index Date	E	IRM Panel ffective/	B8. Flood Zone(s)	(Zo	se Flood Elevation(s) ne AO, use Base	
28045C0363 D	28045C0363 D 10/16/2009 Revised Date 10/16/2009 VE Flood Depth) 22						
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
1	☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:						
B11. Indicate elevation datu	m used for BFE in Item B	9: 🔲 N	IGVD 1929 ⊠ NA	AVD 1988 ☐ Ot	her/Source:		
B12. Is the building located	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes  No						
Designation Date:			□ ОРА				
				08			
				/			

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Sec		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rout	Policy Number:	
138 S Beach Boulevard		
City State ZIP (		Company NAIC Number
Waveland Mississippi 3957	76	
SECTION C – BUILDING ELEVATION INFORMAT	ION (SURVEY R	EQUIRED)
C1. Building elevations are based on:   Construction Drawings*   Building	ding Under Constru	uction* X Finished Construction
*A new Elevation Certificate will be required when construction of the buildir	150 A	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BF Complete Items C2.a–h below according to the building diagram specified in	n Item A7. In Puert	
Benchmark Utilized: BH0959 Vertical Datum:	NAVD88	
Indicate elevation datum used for the elevations in items a) through h) below	V.	
□ NGVD 1929 ☑ NAVD 1988 □ Other/Source:		
Datum used for building elevations must be the same as that used for the B	FE.	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	11.6	X feet  meters
b) Top of the next higher floor	26. 2	✓ feet ☐ meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>24</u> . 6	X feet  meters
d) Attached garage (top of slab)	N/A.	
e) Lowest elevation of machinery or equipment servicing the building	25, 6	X  feet   meters
(Describe type of equipment and location in Comments)	11 1	
f) Lowest adjacent (finished) grade next to building (LAG)	11.1	X feet  meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>11</u> . <u>1</u>	X feet  meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support</li> </ul>	N/A	X feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surveyor, engineer, or arcl I certify that the information on this Certificate represents my best efforts to interstatement may be punishable by fine or imprisonment under 18 U.S. Code, Section 18 U.S. Code,	pret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a licensed land surveyor?		
Certifier's Name License Number		
Jason P Chiniche P.E. 19732		ON P. C.
Title Project Manager		MAN JA SED PROCES
Company Name James J Chiniche PA INC		Seal S
Address		Here
412 HWY 90 Suite 2		19732
City State Bay St. Louis Mississippi	ZIP Code 39520	MISSISSI
Signature Date 03/04/2018	Telephone (228) 467-6755	-
Copy all pages of this Elevation Certificate and all attachments for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3 above is for information only & not to certify the but Map Section B4. Recommend verification of (BFE) by local building official. The responsible for coordinating this certificate with contractor and/or building official of Fire Hydrant Near SE Corner of Property, ELEV 8.2. Section C.2c is top of C ENCLOSURE: is a 14.75ft x 20ft louvered area.	ilding location. The e flood zone is dete I as needed. TBM	e base flood elevation (BFE) is per ermined by graphic plotting, owner is I Is top rim bolt between Albert & Ville

FEMA Form 086-0-33 (7/15)

IMPORTANT: In these spaces, copy the corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 138 S Beach Boulevard	te and Box No.	Policy Number:					
City State ZIP ( Waveland Mississippi 3957	Code 76	Company NAIC Number					
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)							
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
<ul><li>E1. Provide elevation information for the following and check the appropriate box the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).</li><li>a) Top of bottom floor (including basement,</li></ul>	es to show whethe	r the elevation is above or below					
crawlspace, or enclosure) is	feet meter	rs 🗌 above or 🗌 below the HAG.					
crawlspace, or enclosure) is	feet meter						
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section the next higher floor (elevation C2.b in the diagrams) of the building is	on A Items 8 and/or						
E3. Attached garage (top of slab) is	☐ feet ☐ meter	rs 🔲 above or 🔲 below the HAG.					
E4. Top of platform of machinery and/or equipment servicing the building is	feet meter	rs 🔲 above or 🔲 below the HAG.					
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floodplain management ordinance?  Yes No Unknown. The							
SECTION F - PROPERTY OWNER (OR OWNER'S REP	RESENTATIVE) CI	ERTIFICATION					
The property owner or owner's authorized representative who completes Sections community-issued BFE) or Zone AO must sign here. The statements in Sections	s A, B, and E for Zo A, B, and E are cor	one A (without a FEMA-issued or rrect to the best of my knowledge.					
Property Owner or Owner's Authorized Representative's Name							
Address City	St	ate ZIP Code					
Signature Date	Τe	elephone					
Comments							
	a						
	1	Check here if attachments.					

IPORTANT: In these spaces, copy the corre	enonding informatio	on from Section A.	FOR INSURANCE COMPANY USE
MPORTANT: In these spaces, copy the corrections and street Address (including Apt., Unit, Su	ite and/or Bldg No V	or P.O. Route and Box N	
uilding Street Address (including Apt., Onit, Su 38 S Beach Boulevard	ito, anaroi biag. 140.)		
CW80 H 9/10/1000 9/1000 9000	State	ZIP Code	Company NAIC Number
ity /aveland	Mississippi	39576	
		INFORMATION (OPTION	IAL)
he local official who is authorized by law or ordections A, B, C (or E), and G of this Elevation sed in Items G8–G10. In Puerto Rico only, ent  1. The information in Section C was take organized or architect who is authorized.	certificate. Complete er meters.	ine applicable item(s) an	n management ordinance can complete d sign below. Check the measurement ned and sealed by a licensed surveyor, eate the source and date of the elevation
data in the Comments area below.)			FEMA-issued or community-issued BFE)
or Zone AO.			
3. He following information (items 64–	, .		
64. Permit Number	G5. Date Permit Iss	sued	G6. Date Certificate of Compliance/Occupancy Issued
67. This permit has been issued for:	New Construction ☐	Substantial Improveme	ent
_			
<ol><li>Elevation of as-built lowest floor (including of the building:</li></ol>	g basement) ——		feet meters Datum
9. BFE or (in Zone AO) depth of flooding at	the building site:		feet meters Datum
610. Community's design flood elevation:	_		feet meters Datum
ocal Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment and lo	ocation, per C2(e), if a	pplicable)	
		1	Check here if attachmen

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 138 S Beach Boulevard			Policy Number:
City Waveland	State Mississippi	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front/TBM EL: 8.2



Photo Two

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 138 S Beach Boulevard			
City Waveland	State Mississippi	ZIP Code 39576	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption

Photo Two

Photo Two



## NONCONVERSION AGREEMENT with

CITY OF WAVELAND, MISSISSIPPI
This DECLARATION made this 4 day of 4cb. 2018 by PRICE MOUNCE R
("Owner") having an address at  U866 WHITEHAVEN, BATON COUGE, LA 70808 WITNESSETH:
WHEREAS, the Owner is the record owner of all that real property located at  in the City of Waveland, Ms. in the County of Hancock,
designated in the Tax Records as
enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number 342 and under Permit Number
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:
Chy Chy
In witness whereof the undersigned set their hands and seals this
Sur Morre (Seal) Witnesser H. HOOKS III
NOTARY PUBLIC State of Louisiana
Wotary  18311 N. Mission Hills Baton Rouge, LA 70810 La BRN 25097
Notary Public ID# 55595 My Commission expires at Death.